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ABSTRACT

Major considerations that were addressed in developing a social skills curriculum for mildly handicapped adolescents and young adults are outlined. It was necessary that the curriculum be based on as broad a source of information as possible. It had to be responsive to the unique characteristics of the mildly handicapped population and, finally, the method of presentation of the social skills content had to be maximally adaptable to settings where the students would learn to use the skills. The major problems faced in developing the Social Skills Curriculum were the selection and specification of target social skills, the identification of situations in which these skills were appropriate, and the integration of the skills and situations within an effective teaching methodology that could be utilized in schools and other service-delivery settings. Efforts to solve these problems have resulted in a curriculum designed to offer a practical approach to teaching important skills in a neglected area. (Author/CL)

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Developing a Social Skills Curriculum for Mildly Handicapped Adolescents and Young Adults: Some Problems and Approaches

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ABSTRACT

Mildly handicapped adolescents and young adults often have deficits with regard to interacting appropriately with other people. These deficits may affect a number of aspects of mildly handicapped youths' lives including their acceptance by nonhandicapped peers, their performance in school, their adjustment in the community, and their ability to obtain and successfully hold a job. In spite of the fact that social skills appear to be critical in determining success and adjustment for mildly handicapped adolescents, little instructional time in educational programs is devoted to teaching appropriate social behaviors. The purpose of this article is to outline the major considerations that were addressed in developing a social skills curriculum for mildly handicapped adolescents and young adults. The general principles that guided the development of The Social Skills Curriculum were as follows. First, the curriculum had to be based on as broad a source of information as possible. It had to be responsive to the unique characteristics of the mildly handicapped population; and finally, the method of presentation of the social skills content had to be maximally adaptable to settings where the students will learn to use the skills. The major problems faced in developing The Social Skills Curriculum were the selection and specification of target social skills, the identificatin of situations in which these skills were appropriate, and the integration of the skills and situations within an effective teaching methodology that could be utilized in schools and other service-delivery settings. Efforts to solve these problems have resulted in a curriculum designed to offer a practical approach to teaching important skills in a neglected area.

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The ability to interact positively with others is extremely important for everyone, but especially for handicapped adolescents. For these adolescents, who are often already at a disadvantage in school and in the community, as well as recreational and job settings, deficits in knowing how to interact appropriately with others can add to their burdens. Social skill deficits have long been recognized as characteristics that distinguish the handicapped from the

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nonhandicapped (Grossman, 1977; Telford &v Sawrey, 1972; Zigmond & Brownlee, 1980), and often make the mildly handicapped adolescent easily discernible, labeled, and rejected.

In an excellent review on social skill training, Gresham (1981) found several studies indicating that nonhandicapped children rarely interact socially with mainstreamed handicapped children and that some handicapped children do not acquire the appropriate social skills without specific training (Allen, Benning, & Drummond, 1972; Bruininks, 1978; Feitelson, Weintraub, & Michael, 1972; Karnes, Teska, & Hodgins, 1970; Morgan, 1977). Handicapped children also appear to be poorly accepted by their nonhandicapped peers. Such findings have been reported with regard to mentally retarded children (Ballard, Corman, Gottlieb, & Kaufman, 1978; Bruininks, Rynders, & Gross, 1974; Goodman, Gottlieb, & Harrison, 1972; Gottlieb & Budoff, 1973), the learning disabled (Bruininks, 1978; Bryan, 1974, 1976, 1978; Bryan & Wheeler, 1972), and the emotionally disturbed/behaviorally disordered (Morgan, 1977; Quay, Morse, & Cutler, 1966).

In addition, there is evidence to suggest that social skills performance of mildly handicapped adolescents is significantly worse than the performance of their nonhandicapped peers. Mathews, Whang, and Fawcett (1982) found that LD adolescents performed significantly worse than their non-LD peers on four of ten tested occupational social skills. Likewise, Schumaker, Hazel, Sherman, and Sheldon (1982) noted that LD youths performed worse than their non-LD peers on seven of eight social skills tested. Further, the LD adolescents were found to perform similarly to a group of court-adjudicated adolescents.

These apparent deficits could have an effect on mildly handicapped individuals' social life adjustment patterns. For example, evidence indicates a relationship between social behaviors and school achievement. Students who are able to ask questions, seek out the teacher, ask for his/her input, answer or attempt to answer questions, look at and smile at the teacher, and carry on conversations generally receive more positive teacher attention and experience more academic success (Cartledge & Milburn, 1978). Some studies have identified specific social "survival skills" that appear to be related to academic achievement (Cobb & Hops, 1973; Hops & Cobb, 1973; Walker & Hops, 1976). Improving mildly handicapped adolescents' social skills in the classroom, therefore, may enable them to receive more positive teacher attention and more academic help, thereby improving academic performance and increasing the likelihood that they will be skilled enough to obtain jobs and live independently.

Social skills deficits may also impact the acceptance of the mildly handicapped within the community. Social skills, or the lack thereof, seem to be important in determining whether youths are referred to juvenile courts. For example, a number of studies have indicated that, although the type of behavior (offense) is critical, a youth's interaction skills are a major determinant of police dispositional decisions (Black & Reiss, 1970; Goldman, 1963; Piliavin & Briar, 1964). Also, once a youth is labeled, especially "delinquent," his/her ability to get along with teachers, social workers, probation officers, and judges often has a major bearing on whether the youth remains in the community or is institutionalized (Cohn, 1963; Gross, 1967). Thus, engaging in appropriate social behavior may mean the difference between institutionalization and being allowed to live in the community.

Social skills also appear to be related to obtaining a job and successful job performance (Fulton, 1975). Goldstein (1972), for example, found that

employers tend to view vocational adjustment problems as related more to social behaviors than to the actual job or task performance. Thus, it may be just as important to follow instructions properly, accept criticism appropriately, and negotiate conflict situations as it is to perform the job well.

Finally, social skills have been identified as a critical variable in determining the adjustment and quality of life of the mildly handicapped individual in the community (Edgerton, 1967; McDevitt, Smith, Schmidt, & Rosen, 1978; Schalack & Harper, 1978). In fact, lack of appropriate social skills has been referred to as a determining cause of handicapped persons' failure in community placement (Eagle, 1967; Stacy, Doleys, & Malcolm, 1979; Windle, Stewart, & Brown, 1961).

Thus, it appears that the degree to which mildly handicapped adolescents can interact effectively on a social basis is a critical determinant of their success and adjustment (Alley & Deshler, 1979; Siegel, 1974; Zigmond & Brownlee, 1980). Many of the problems associated with social skills deficits may be remediated with a social skills training program. For example, poor acceptance of handicapped children by peers may not be inevitable since social skill training can increase the number of positive interactions in which handicapped youths engage and the likelihood of acceptance by nonhandicapped peers (Gresham, 1981). Nevertheless, most instructional time in educational programs for mildly handicapped learners is spent in the acquisition of academic and vocational competencies. Relatively little attention is devoted to teaching students the social skills that will facilitate their success and adjustment in learning, employment, daily living, and leisure situations. If mildly handicapped learners are to be successfully integrated into society, teaching them appropriate social behaviors must then become an important instructional goal. The realization of this instructional goal is contingent in part on the development of a curriculum for teaching appropriate social behaviors.

This article will outline some of the issues that were faced in developing a social skills curriculum for mildly handicapped adolescents and young adults, a project that began in the fall of 1981. The overall goal of the project was to lessen or remediate the effects of handicapping conditions by teaching functional social skills that would allow learners to be more adept and effective in educational, employment, and everyday-living situations. The populations targeted for teaching were mildly handicapped adolescents who were learning disabled, mentally retarded, and emotionally disturbed. The project has resulted in an initial curriculum that has undergone preliminary field testing. The results from the preliminary testing have been used to develop a revised curriculum that is currently undergoing extensive field testing. The results of this field testing will be reported in a subsequent paper. The purpose of this paper is to describe some of the issues and decisions that were involved in designing The Social Skills Curriculum. These issues are ones that are likely to be faced by those who develop curricula in areas such as social skills where the domain and content are relatively undefined.

GENERAL PRINCIPLES GUIDING THE DEVELOPMENT PROCESS

Given the special problems associated with developing a social skills curriculum and those associated with teaching mildly handicapped adolescents and young adults with the settings where they are typically taught, the development process to be described here was guided by three general principles.

The first principle guiding development was that the curriculum should be based on as broad a source of information as possible, including observa-

tional accounts, formal research, and practical experience. Thus, the available writings describing the social skills deficits of handicapped people in contrast to nonhandicapped people provided one source of information (Schumaker, Hazel, Sherman, & Sheldon, 1982). Studies showing correlations between successful adjustment and various skills provided another source of information (Hazel, Schumaker, Sherman, & Sheldon-Wildgen, 1981). Yet another source of information was the writings of professionals who focused on the social behavior of the mildly handicapped (Kronich, 1981). Equally important were the opinions of mildly handicapped adolescents themselves and of people who typically interact with mildly handicapped adolescents such as teachers and parents. These individuals were asked to identify what social skills they thougnt were most relevant and useful and in what situations the skills needed to be displayed. In addition, they were also asked to identify common problem situations for mildly handicapped youth.

The second principle guiding the development process was that The Social Skills Curriculum must be responsive to the unique characteristics of the mildly handicapped population. These learners' skills and deficits must be understood in light of the different settings and conditions in which they are taught, and the designed materials must be responsive to those factors. The Social Skills Curriculum for handicapped students should therefore incorporate those instructional methodologies and practices that have been found to be effective with this population. In recent years, significant progress has been made relative to the specification of instructional practices that facilitate the learning and performance of mildly handicapped adolescents and young adults (Schumaker, Deshler, Denton, Alley, Clark, & Warner, 1981; Schumaker, Deshler, Nolan, Clark, Alley, & Warner, 1981).

The third principle guiding development efforts was that the formats and modes of presentation incorporated within a social skills curriculum be maximally adaptable to settings in which social skills are likely to be taught or influenced. That is, mildly handicapped adolescents should be instructed in both school and nonschool settings (e.g., group homes, agencies, and on-the-job). Since a variety of service-delivery models are used within these settings, instructional materials must be highly adaptable, flexible, and robust. Numerous educational materials and curricula have been developed that are both theoretically sound and well-grounded in a research base, but fail to be used effectively in everyday practice. Thus, people with considerable experience in the realities of implementing curricula in practice were an important source of informaiton.

PROBLEMS AND ACTIVITIES DURING THE DEVELOPMENTAL PROCESS

There were several problems that were faced in developing The Social Skills Curriculum. First, the content of a teaching program for social skills is not well established. In contrast, many other subjects taught to handicapped adolescents and young adults, such as math, reading, social studies, and science, have a content that is reasonably well established or at least there are existing curriculum materials for these content areas that are commonly accepted as having appropriate content, structure, and sequence. This is not true, in large part, in the area of social skills where there are only a few examples of curriculum products (Dupont & Dupont, 1979; Wehman, 1975) and little information on what constitutes acceptable and important social behavior.

Second, the skills to be taught in a social skills curriculum are very complex. To interact appropriately with other people, one must (a) discriminate social

cues and situational factors that provide the context for applying social skills, (b) understand the typical consequences of various behaviors, (c) organize behavior into a smooth sequence, and (d) recognize the changing nature of social norms and values that interact to determine what constitutes appropriate social behavior. A learner must be taught that in one setting and to one person, a particular sequence of behaviors will typically result in one type of consequence, whereas the same sequence of behaviors in another setting or to another person may result in different consequences. Further, an "understanding" of all these factors is not enough. The learner must display a smooth integrated sequence of verbal and nonverbal behavior to perform the skill correctly.

A major goal in the development process was the specification of target skills in relationship to identifiable social situations in ways that were understandable to our learners but that also reflected the social realities of everyday life. Further, this specification needed to be combined with teaching methodologies that would foster the effective use of appropriate skills by the learners in a variety of social situations. Described below are the efforts that were undertaken to (a) select and specify the target social skills, (b) select the situations in which the social skills are used and integrate the skills with the situations, and (c) select and describe effective teaching methods.

Selection and specification of target social skills. One of the first tasks undertaken in developing The Social Skills Curriculum was the determination of the social skills that would form the content of the curriculum. These had to be skills that are commonly needed by the target population. To accomplish this task, a review was completed of the research literature on the social skills of the mildly handicapped and the social situations in which these mildly handicapped experience problems. Decision rules were then employed to identify deficit skill areas. The following decision rules were used.

1. A social skill deficit exists if mildly handicapped individuals are significantly different from nonhandicapped individuals on a measure of the social skill.
2. A social skill deficit exists if mildly handicapped individuals are not significantly different from nonhandicapped individuals on a measure of the social skill, but appear to need to use the skill more than the nonhandicapped (e.g., requesting help or feedback from a teacher).
3. A social skill deficit exists if 30% or more of the handicapped population show poor performance of the skill in studies where no comparisons are made between handicapped and nonhandicapped subject.

Research studies with learning disabled adolescents (Deshler, Schumaker, Warner, Alley, & Clark, 1980; Hazel, Schumaker, Sherman, & Sheldon, 1982; laGreca & Mesibov, 1981; Mathews, et al., 1982; Schumaker, Hazel, Sherman & Sheldon, 1982; Schumaker, Sheldon, & Sherman, 1982; Zigmond & Brownlee, 1980), with emotionally disturbed adolescents (Freedman, Rosenthal, Donahue, Schmidt, & McFall, 1978; Hazel, Schumaker, Sherman, & Sheldon-Wildgen, 1981; Spence, 1981), and with mentally retarded adolescents and young adults (Bates, 1980; Bornstein, Bach, McFall, Friman, & Lyons, 1980; Geller, Wildman, Kelly, & Laughlin, 1980; Kelly, Furman, Phillips, Hathorn, & Wilson, 1979; Kelly, Wildman, Urey, & Thurman, 1979; Meredith, Saxon, Doleys, & Kyzer, 1980) were reviewed and a survey was completed to yield a

large number of deficit skill areas. A few examples of the types of skills identified through the review are: interacting with authority figures, participating in class discussions, participating in school activities, engaging in planned activities with peers, talking with parents about what is happening in the parents' lives, relating to peers, expressing opinions, trying to improve when criticized, and being able to verbally express thoughts. A number of specific skill components were also identified such as eye contact and body posture.

Once a list of skill deficiencies was compiled from the literature, mildly handicapped adolescents, their parents, and their teachers were surveyed to determine social problem areas as well as specific social skill deficiencies. Example skill deficiencies identified by these individuals included accepting negative feedback, negotiation, giving positive feedback, conversation, eye contact, and shaking hands with others. These social skills were consolidated with the list of social skills derived from the published literature.

This list of deficit areas was then clustered into related groups. For each related group of deficits, a social skill was identified. From this resulted a list of 30 general social skills that a person could use in ameliorating all of the listed deficits. These 30 skills are:

Accepting Compliments	Giving Help
Accepting Criticism	Giving Rationales
Accepting "No"	Goodbye Skills
Accepting Thanks	Greeting
Active Listening	Interrupting Correctly
Answering Questions	Introducing Yourself
Apologizing	Joining Group Activities
Asking for Feedback	Making Friends
Asking Questions	Negotiation
Body Basics	Persuasion
Conversation	Problem Solving
Following Instructions	Responding to Teasing
Getting Help	Resisting Peer Pressure
Giving Compliments	Saying Thanks
Giving Criticism	Starting Activities With Others

For example, the skill of following instructions could be used to ameliorate such listed deficits as the inability to complete a series of instructions and the inability to complete an assigned task on time. Additionally, it seemed logical that some deficits require a number of social skills. For example, in learning how to interact appropriately with authority figures, a youth could use the social skills of following instructions, accepting criticism, negotiating, and giving negative feedback.

Once the 30 skills were identified, they were grouped into social skills clusters. For example, all of the skills related to giving and accepting feedback were grouped into the Feedback Cluster. These clusters form the structure for the content component of The Social Skills Curriculum.

After the skills had been clustered, a content validation process began. For this purpose, a panel of content judges was formed consisting of teachers of the mildly handicapped, experts in the field of the mildly handicapped, and experts in the field of social skills. Participants were given the list of skills and asked to rate the importance for mildly handicapped individuals of learning each skill, using seven-point Likert-type scales. They were also asked to rank order the skills. Additional irrelevant skills were included to assess the accuracy of the judges' ratings. The judges also were asked to rate the representativeness of the listed skills. Finally, the judges were asked to name any

additional social skills not on the presented list but needed by mildly handicapped individuals. This process followed Goldfried and D'Zurilla's (1969) behavioral-analytic model. The results of the panel review showed that all the skills were rated as important or very important at least 50% of the time. The irrelevant skills were judged as unimportant or very unimportant more than 50% of the time. The skills that were most often ranked among the top ten of importance were: problem solving, resisting peer pressure, following instructions, accepting criticism, getting help, negotiating, making friends, asking questions, and answering questions.

Integrating the skills within areas of social interaction. Once the social skills content had been defined, the next step was to consider the situations in which the skills are to be used and how to integrate the skills into such situations during the teaching process. Effective social responses to particular situations can be taught (the Problem-specific Approach), or the general skills required in classes of social situations can be taught (the General-skills Approach). Using the Problem-specific Approach, the learner is taught to identify a problem social situation and perform an appropriate response for that particular problem situation. For example, if a person has difficulty accepting criticism from his mother, a sequence of behaviors may be developed for him to say and do when his mother criticizes him. Taken in its most restrictive form, the difficulty with this approach is that unique skill sequences must be developed for each problem situation. While this approach yields solutions to specific problems, it does not necessarily produce a generalizable social skills repertoire. Because there is an infinite number of social problems that an individual can potentially encounter, the use of this approach might mean that each potential problem situation would need to be considered separately and skills developed for each, producing an unworkably large curriculum.

The General-skills Approach, on the other hand, requires that the student learn the general skills that are required in certain classes of social situations. Applying the General-skills Approach to the example described above, the student would learn the general skill of accepting criticism, and then would apply this skill to related problem situations. Use of the General-skills Approach greatly reduces the number of social skills to be trained since the skills are divided into major-skill areas as opposed to individual problem situations (e.g., the class of accepting criticism versus accepting criticism from your mother, accepting criticism from your boss, accepting criticism from your teacher, etc.). Additionally, the skill may be more generalizable to novel problem situations because of the emphasis on their generality. This approach, however, may produce a problem if the learner is unable to recognize a particular situation that requires the use of a given skill or fails to generalize within a skill class.

The approach chosen for The Social Skills Curriculum integrates the two approaches described above by using a General-skills Approach tied to specific problem areas. That is, both general skills and their relationship to problem situations are taught. This method has the advantage of teaching generalizable skills while the learner is made aware of the type of situations in which the skills will be effective. Thus, for each general skill, the general characteristics of situations that require the use of the skill were determined. Based on these characteristics, problem situations generated by the parent, teacher, and youth surveys were matched to each skill.

Finally, the component steps of each skill were developed to enable a person to respond to the category of problem situations related to that skill.

For example, the skill of resisting peer pressure was developed to incorporate the nonverbal components (such as eye contact and body posture) and the general verbal components (such as a serious voice tone) necessary to communicate the content of the message. Then the verbal steps for the skill were outlined sequentially. They include such steps as (a) say "No," (b) give a reason, (c) suggest an alternative activity, and (d) leave if necessary. This collection of skill components comprises the general skill "resisting peer pressure." This process was followed for all 30 social skills and yielded the verbal and nonverbal skill components for each skill designed to cover a broad array of problem situations.

The teaching methods and sequence of activities. The Social Skills Curriculum was designed to include a variety of instructional methods to facilitate learning. These included breaking a complex behavior into smaller component parts, giving rationales, modeling the skill, providing positive reinforcement of successive approximations toward a final correct performance of the skill, providing corrective feedback about practice attempts, requiring practice to a mastery criterion, and using multiple exemplars of situations in which skills are practiced to facilitate generalization. Further, for practical reasons it was important that the curriculum be learner managed to as great an extent as possible, requiring a minimum amount of supervision from a teacher.

The instructional methods described above are interspersed through three kinds of sequenced activities: Awareness, Practice, and Application Activities. During the Awareness Phase, learners interact with written materials that consist of illustrated booklets and workbooks. The booklets illustrate a story or theme in which a group of young people are faced with a variety of problem situations, many of which require the use of social skills. The illustrated booklets are designed to stimulate high interest on the part of the learners and to provide a context or general rationale for learning particular social skills. Once the booklet has been read, the learner proceeds to completing the workbook. There is one workbook for each social skill. Each describes a particular skill to be learned, the reasons or rationales for learning the skill, the specific behaviors required for the skill, and the general characteristics of situations in which the skill may be appropriate, and it provides a demonstration of the appropriate use of the skill. The material in the illustrated booklet and the workbook is written at a fourth-grade reading level. Learners complete a workbook by reading the material and writing answers or examples in an answer booklet. For example, the learner may be required to select one answer among four as the correct answer to a question, or to give a new example of a specific situation in which a particular skill would be appropriate. Learners also practice writing the skill steps. Written practice is important because learners need to be able to instruct themselves on what to do next as they perform a skill, which requires that they know the steps of the skill perfectly (Alley & Deshler, 1979). Answers to workbook questions are checked by a teacher or another person. Learners are praised for correct work, and if necessary, required to go back and correct answers.

The Practice Phase of training consists of role-playing practice. Role-playing practice is important for skill mastery. Hazel et al. (1981) reported that youths who did not practice social skills to criteria were not able to use the skills in novel role-playing situations. Since learners are expected to use their newly-learned social skills in novel situations every day, it seems unlikely they will be able to do this unless they can use them in novel role-playing situations.

Role-playing practice in response to previously experienced and novel

problem situations is done with a skilled peer (someone who has already met criteria on a particular skill). The peer participates in providing a model of the use of the skill, prompts the learner to perform each skill step, and provides praise and corrective feedback to the learner. Once the learner can perform the skill correctly with the peer in response to a novel problem situation, the learner engages in role-playing with a teacher or another person. Again, novel problem situations are employed until the learner meets criteria performance.

The third training phase is the Application Phase. Several activities are employed to help facilitate the generalized use of the newly trained skills. This seems necessary because Gorney-Krupsaw, Atwater, Powell, and Morris (1981) and Schumaker and Ellis (1982) showed that learners failed to generalize learned social skills to real-life situations following social skills training. One acitvity included in The Social Skills Curriculum is the Missions Game played by learners, teachers, and other people in the learning environment. In this game, learners who have been taught a particular skill are given a mission that instructs them to surprise another learner some time during the day with a situation that requires the use of that social skill. The situation must fit within the naturally occurring activities of the environment. Responses to the surprise situations are scored by the person presenting the situation. Points, translated into part of the class grade or exchangeable for rewards, are earned by the one person for presenting the situation and by the other person for appropriate behavior in response to the situation. Teachers and other people in the learning environment also participate by presenting surprise situations as well as by using naturally-occurring opportunities, such as when they give instructions, to score and reward learner preformance. Another Application activity involves the use of home notes to obtain feedback about whether a learner has used a social skill appropriately at home or in some other setting outside of the teaching situation. Of course, the use of home notes requires that someone at home (e.g., a parent) or in another setting (e.g., a work supervisor) is familiar with the steps involved in the social skill and is willing to participate. An additional Application activity requires that learners be given an assignment of watching a television program and of describing situations from the program where particular social skills should have been used or were used and what the consequences of the use or nonuse of the skills were.

Thus, The Social Skills Curriculum involves the use of self-instructional materials (the illustrated booklets and workbooks), modeling, role-playing, practice with a peer, criteria role-playing with a teacher or another person, and a series of application activities designed to help foster the use of social skills outside the learning situation. Although a teacher or another person is integrally involved in the curriculum, this involvement is primarily to monitor learners' mastery of each skill and to be a resource person with whom the learners can discuss difficulties and resolve problems.

CONCLUSION

The Social Skills Curriculum is designed to best meet the needs of mildly handicapped adolescents and young adults. It has a number of characteristics designed to provide the most optimal instruction. First, the social skills that form the content of the curriculum were identified and validated as common deficits for the mildly handicapped population. Second, these skills were integrated with specific problem situations identified through parent, teacher, and youth reports as common problems for the mildly handicapped. The component steps for each skill were identified to respond to these

problem situations. Third, a number of teaching activities were incorporated to insure acquisition of the skills. These activities, sequenced into awareness, practice, and application activities, were designed to be maximally adaptable to a variety of teaching settings. If it is used properly, the curriculum should be effective in teaching persons the social skills that can help them be successful in their daily lives. The Social Skills Curriculum holds promise for effective instruction in a relatively under-addressed but much-needed area.

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